PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This for appropriate. All further or indicate unless correct maintenants.	ry should be used to respondence including below or directed othus.	g the Patent, advance of the instance of the patent, advance of the instance o	orders and notification a) specifying a new c	of m	naintenance fees v pondence address;	vill be a and/or	mailed to the curren (b) indicating a ser	t corresponder "F	ondence address as EE ADDRESS" for	
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JOE A. BROCK, MARTINE PENIL 710 LAKEWAY D			Cer	tificate	of Mailing or Tran) Transmittal is bein ficient postage for fi ISSUE FEE address 1) 273-2885, on the	smission g deposi rst class above, date indi	ted with the United mail in an envelope or being facsimile cated below.			
SUITE 170 SUNNYVALE, CA		Ka	ay Harlow	11	-1		(Depositor's name)			
12/07/2006 EFLORES1 00		De	ecember 1,	7 a 200	166		(Signature)			
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09/812,537	03/19/2001		Vladimir Matena		· 	<u> </u>	SUNMP002B		2572	
TITLE OF INVENTION: INCLUDING LOAD BALA	METHOD AND A	PPARATUS FOR PRO	VIDING APPLICAT	ION	SPECIFIC STRA	TEGIE	S TO A JAVA PL	.ATFOR	М	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUI	3	DATE DUE	
nonprovisional	МО	\$1400	\$300		\$0		\$1700		12/14/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	s				٠		
DELGADO, MICHAEL A		2144	709-226000						•	
1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.									
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN Sun Microsy	s an assignee is identi n 37 CFR 3.11. Comp			the pag an a	atent. If an assign assignment. and STATE OR C			documen	t has been filed for	
Please check the appropriate	e assignee category or	categories (will not be p	rinted on the patent):		Individual 🙀 Co	orporati	on or other private gr	oup enti	ty Government	
4a. The following fee(s) are ☐ Issue Fee ☐ Publication Fee (No s ☐ Advance Order - # o	b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0805 (enclose an extra copy of this form).									
5. Change in Entity Status a. Applicant claims S	SUNMP002B Description of the sum									
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Authorized Signature	Inst	Zhartre	1	-	· Date	Dece	mber 1, 200	6		
Typed or printed name _	Chester E.	Martine, Jr/			Registration N	lo	19,711			
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